

1915i Talking Points

OMPP/DMHA

2-15-10

- Target Population – Handout
150% FPL
Approved diagnosis (Serious and Persistent Mental Illness)
Level of Need (4 and 5)
Independent Needs Assessment
- Initial estimate for consumers eligible for 1915i services is approximately 3-5% of all consumers with SMI (LONs 1-5) receiving MRO services. Of the total SMI population, approximately 10% of consumers with LONs 4 and 5 are anticipated to qualify for (i) services.
- MRO and 1915i services will be mutually exclusive with the intention of ensuring consumers are served with the most appropriate service array. (right consumer, right service, right amount)
- Only Behavioral Health service providers offering a full continuum of care will be eligible for reimbursement under the 1915i. These entities may subcontract for services as appropriate.
- 1915i requires match which will be facilitated using the same process as MRO
- A single 12-month package will be available to consumers who qualify for (i) services. A 1915i Service Document is being developed that will mirror the Proposed MRO Services document in format and content. Provider qualification will be similar to proposed MRO services: Licensed Professionals, QBHP, and OBHPs.
- Proposed 1915i service array under consideration:
 - Adult day services
 - Home and community-based habilitation and support
 - Respite care
 - Behavioral support services
 - Therapy services

- Addiction counseling
 - Peer support services
 - Prevocational and Supportive employment services
 - Case management
- Implementation- timeline; phase in
 - MRO will implement as planned on 7-1-2010
 - 1915i is a separate SPA which will require approval from CMS
 - Those consumers who have a rehabilitation treatment plan and are making efforts to reach their rehabilitative goals may continue to receive MRO services. As the state identifies and implements new programs/services that may better meet the needs of some consumers, they should be referred for consideration for the more appropriate service/program.
 - The State intends to implement within one quarter of CMS approval, assessments will begin- target implementation 3rd quarter SFY2011
 - Implementation will be phased in. Potential referrals for 1915i will be triggered by ANSA reassessments.
- Eligibility for “I” services will require an independent assessment. Indiana is proposing a model whereby providers making referrals will gather clinical and historical information which will be reviewed by an independent assessor to determine 1915i service eligibility. An annual assessment will be required.
- The 1915(i) proposal is subject to CMS approval, rule promulgation, and budgetary considerations.